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Enclosures

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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No. 1977672

Inventor: David Murrin, 25 Primrose Lane,
Roosevelt, New York 11575

Title: WHEEL MECHANISM FOR SKI-EQUIPPED
VEHICLES

To: Mail Stop Patent Application
Commissioner for Patents
P. O. Box 1450
Alexandria, Virginia 22313-1450

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APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS
<input checked="" type="checkbox"/> Fee Transmittal Form PTO/SB/17 (In duplicate)	<input checked="" type="checkbox"/> Information Disclosure Statement, including Form PTO-1449 and copies of 9 references.
<input checked="" type="checkbox"/> Applicant claims small entity status.	<input checked="" type="checkbox"/> Check No. <u>1929</u> in the amount of \$ <u>385.00</u> .
<input checked="" type="checkbox"/> Specification and 1 Claim (15 pp.)	<input type="checkbox"/> Nonpublication Request Form PTO/SB/35
<input checked="" type="checkbox"/> Drawings, showing Figs. 1 and 2 (1 p.)	<input checked="" type="checkbox"/> Return Receipt Postcard.
<input checked="" type="checkbox"/> Combined Declaration and Power of Attorney.	

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Date: January 26, 2004

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

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January 26, 2004.

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U.S. PTO

UTILITY FILING FEE TRANSMITTAL

Attorney Docket No. 1977672

Inventor:
David Murrin Applicant claims small entity status.Total Amount of Payment: \$ 385.00

Title: WHEEL MECHANISM FOR SKI-EQUIPPED VEHICLES

METHOD OF PAYMENT		FEE CALCULATION (continued)																									
<input checked="" type="checkbox"/> Check No. <u>1929</u> The Commissioner is authorized to credit any overpayments or charge any additional fee(s) during the pendency of this application to Deposit Account No. 50-0961		2. EXTRA CLAIM FEES <u>Fee Paid</u> Total Claims <u>1</u> - 20 = <u>0</u> X <u>9</u> = <u>0.00</u> Independent Claims <u>1</u> - 3 = <u>0</u> X <u>43</u> = <u>0.00</u> <u>Large Entity Small Entity</u> <table> <thead> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>43</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> </tr> </tbody> </table> <u>SUBTOTAL (2) \$ 0.00</u>		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	1201	84	2201	43	Independent claims in excess of 3	1202	18	2202	9	Claims in excess of 20									
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SUBMITTED BY:

Name: Donald R. Schoonover Reg. No. 34,924 Telephone: (417)724-2188Signature: Donald R. Schoonover Date: January 26, 2004

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